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To: U.S. Patent and Trademark Office – From: Christian R. Andersen
Examiner: T.D. NGUYEN Sr. Paralegal – Intellectual Property
Group Art Unit: 2665

Fax: 703-872-9306

Pages
with 19
Cover:

FORMAL SUBMISSION OF:

1) Transmittal Form; and

2) Amendment

Title: RADIO NETWORK ROUTING APPARATUS
Serial No. 09/546,052
Filing Date: April 10, 2000
First Named Inventor: Joseph J. WEISTEIN
Atty. No. 99-432

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that the above-referenced documents are facsimile transmitted to the Patent and Trademark Office on the date shown below:


Christian R. Andersen

Date of Transmission: February 5, 2004

FEB 05 2004

OFFICIAL Patent
Attorney's Docket No. 99-432**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of)	Mail Stop Non-Fee Amendment
)	
Joseph J. WEISTEIN et al)	Group Art Unit: 2665
)	
Application No.: 09/546,052)	Examiner: T.D. NGUYEN
)	
Filed: April 10, 2000)	
)	
For: RADIO NETWORK ROUTING)	
APPARATUS)	
)	
)	
)	
)	

AMENDMENT/REPLY TRANSMITTAL LETTER

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Enclosed is a reply for the above-identified patent application.

- ☐ A Petition for Extension of Time is also enclosed.
- ☐ A Terminal Disclaimer and a check for ☐ \$55.00 ☐ \$110.00 to cover the requisite Government fee are also enclosed.
- ☐ Applicant(s) request continued examination under 37 C.F.R. § 1.114 and enclose the ☐ \$385.00 ☐ \$770.00 fee due under 37 C.F.R. § 1.17(e).
- ☐ Applicant(s) previously submitted _____, on _____, for which continued examination is requested.
- ☐ A request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) is also enclosed.

Amendment/Reply Transmittal Letter
Application Serial No. 09/546,052
Attorney's Docket No. 99-432
Page 2

- ☒ No additional claim fee is required.
☐ An additional claim fee is required, and is calculated as shown below:

AMENDED CLAIMS					
	No. of Claims	Highest No. Of Claims Previously Paid For	Extra Claims	Rate	Additional Fee
Total Claims		Minus		x \$18.00 =	
Ind. Claims		Minus		x \$ 86.00 =	
If Amendment adds multiple dependent claims, add \$290.00					
Total Amendment Fee					
If Small entity status is claimed, subtract 50% of Total Amendment Fee					
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					

- ☐ A claim fee in the amount of \$ _____ is enclosed.
☐ Charge \$ _____ to Deposit Account no. 07-2347.

To the extent necessary, a petition for an extension of time under 37 C.F.R. § 1.136 is hereby made. Please charge any shortage in fees due in connection with the filing of this paper, including extension of time fees, to Deposit Account No. 07-2347 and please credit any excess fees to such deposit account.


Amendment/Reply Transmittal Letter
Application Serial No. 09/546,052
Attorney's Docket No. 99-432
Page 3

The Commissioner is hereby authorized to charge any other appropriate fees that may be required by this paper that are not accounted for above, and to credit any overpayment, to Deposit Account No. 07-2347.

Respectfully submitted,

VERIZON CORPORATE SERVICES GROUP INC.

By: _____


Joel Wall
Reg. No. 25,648

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Date: February 5, 2004